Approved for use through 06/30/2010. OMB 0651-0032

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Complete if Known Effective on 12/08/2004. 10/554,123-Conf. #4634 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMITTAL August 21, 2006 Filing Date Marja T. Nevalainen First Named Inventor For FY 2008 **Examiner Name** L. V. Wollenberger Applicant claims small entity status. See 37 CFR 1.27 1635 Art Unit G0762.70004US01 TOTAL AMOUNT OF PAYMENT 525.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Other (please identify): Check Credit Card Money Order None X Deposit Account Name: Wolf, Greenfield & Sacks, P.C. Deposit Account Deposit Account Number: 23/2825 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity Small Entity Small Entity** Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 210 105 Utility 310 155 510 255 65 Design 210 105 100 50 130 80 Plant 210 105 310 155 160 510 255 620 310 Reissue 310 155 0 0 105 0 210 Provisional 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 370 185 Multiple dependent claims **Multiple Dependent Claims Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) (round up to a whole number) x /50 = - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2253 Extension for response within third month 525.00 SUBMITTED BY Registration No. 32,227 Telephone 617.646.8000 Signature (Attorney/Agent) Date Name (Print/Type) Patricia Granahan May 27, 2008

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: May 27, 2008

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PTO/SB/22 (01-08) 4/30/2008. OMB 0651-0031 RTMENT OF COMMERCE a valid OMB control number.

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) G0762.70004US01					
FY 2008 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			G076.	2.700040501			
Application Nur	mber 10/554,123-Conf. #	4634	Filed	August 21, 2006			
For METHO	DOS AND COMPOSITIONS FOR THE I	NHIBITION OF S	TAT5 IN PROSTA	TE CANCER CELLS			
Art Unit 1	1635		Examiner	L. V. Wollenberger			
This is a reques application.	t under the provisions of 37 CFR 1.136(a)) to extend the peri	od for filing a reply i	n the above identified			
The requested e	extension and fee are as follows (check tir	me period desired a	and enter the approp	priate fee below):			
		<u>Fee</u>	Small Entity Fe				
Or	ne month (37 CFR 1.17(a)(1))	\$120	\$60	\$			
Tw	vo months (37 CFR 1.17(a)(2))	\$460	\$230	\$			
X Th	ree months (37 CFR 1.17(a)(3))	\$1050	\$525	\$ 525.00			
Fo	our months (37 CFR 1.17(a)(4))	\$1640	\$820	\$			
Fiv	ve months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$			
X Applicar	nt claims small entity status. See 37 Cl	FR 1.27.					
	in the amount of the fee is enclosed.						
. 📙	nt by credit card. Form PTO-2038 is att	ached.					
<u></u>	ector has already been authorized to ch		application to a De	posit Account.			
	ector is hereby authorized to charge an	-					
	Account Number 23/2825		osed a duplicate co				
WARNIN Provide	IG: Information on this form may become pucredit card information and authorization or	ublic. Credit card inf n PTO-2038.	ormation should not	be included on this form.			
I am the	applicant/inventor.						
[assignee of record of the entire in Statement under 37 CFR 3			96).			
	x attorney or agent of record. Reg	istration Number	32,227				
J	attorney or agent under 37 CFR						
L	Registration number if acting und		~(0)				
70	HAYEL (ROQUE EL-HAYE) Signature	K, 1166.100,.3	3,73 <u>7) Ma</u>	ay 27, 2008 Date			
/	_		61	7.646.8000			
	Typed or printed name			Telephone Number			
	rres of all the inventors or assignees of record of the er ure is required, see below.	ntire interest or their repr	esentative(s) are required	. Submit multiple forms if more			
X Total	of 1 forms are submi	itted.					

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Dated: May 27, 2008

Signature:

(Crena Pacheco)

05/29/2008 RFEKADUI 00000023 10554123